Division of Corporations Public Access System

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05 NOV 29

To:

Division of Corporations

Fax Number

: (850)205-0383

: C T CORPORATION SYSTEM Account Name

Account Number : FCA000000023 : (850)222-1092 Fax Number : (850)878-5926

### FOREIGN PROFIT QUALIFICATION

ARA Subsidiary Corp.

Certificate of Status	0
Certified Copy	1
Page Count	06
Estimated Charge	\$78.75

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#### COVER LETTER

TO: Registration Section Division of Corporations		
SUBJECT: ARA Subsidiary Corp.		
(Name of corporation - must include suffix)	•	
Dear Sir or Madam:		
The enclosed "Application by Foreign Corporation for Authorization to Transact Business in Florida," "Certificate of Existence," and check are submitted to register the above referenced foreign corporation to transact business in Florida.	ı	
Please return all correspondence concerning this matter to the following:		
Team 1; Atin:		
(Name of Person)	•	
CT Corporation System	_	
(Firm/Company)	72 23	05
1201 Peachtree Street, N.E.	<u>Ξ</u> 5	₹
· (Address)	がだ。	~
Atlanta, GA 30361	<b>2</b>	Ġ
(City/State and Zip code)	OF ST	$\geq$
For further information concerning this matter, please call:	STATE	05 NOV 29 NM 10: 06
# ( )		
(Name of Person) (Area Code & Daytime Telephone Number)		•
,		
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301  MAHLING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		
Enclosed is a check for the following amount:		
\$70.00 Filing Fee \$\times \text{ \$78.75 Filing Fee & Certificate of Status} \text{ \$87.50 Filing Fee & Certified Copy} \text{ \$87.50 Filing Fee, Certified Copy} \text{ \$Certified Copy}  \$Certi	ı &	

APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT

1. ARA Subsidian		·				-		
(Buter name of a "Inc.," "Co.," "C	orporation; must include "INCO lorp," "Inc," "Co," or "Corp.")	RPORATE	o," "Company,	" "CORPORATION,"				
(If name unavai	sble in Florida, enter alternate co	orgonate nam	e adopted for the p	urpose of transacting bu	dness in Florida)	-		
2. Delaware		3	ŀ <u>.</u>			_		
(State or country	under the law of which it is inco	rporated)	(	(FEI number, if applicab	(e)	_		
4. 11/3/05		5	Perpetual					
	of incorporation)			r corp. will cease to exis	cor "perpetual")	•		
6. upon qualificati	<b></b>					_		
			in Florida, if prior 1502, F.S., to deter			-		
7, 5 Cheary Hill Dr	ive, Danvers, MA 01923						~	
	(Princi	pal office ad	(dress)			£ E E E E E	3	
Same						_ <del>注</del> 言	5	
	(Curre	nt mailing ad	idress)			257	MOV 29	
						취곡		
	y and all acts or activities for wh						<u> </u>	į
(Purpose)	s) of corporation authorized in h	ome state or o	country to be card	ed out in state of Florida)		<u> </u>	S	,
9. Name and sire	et address of Florida registere	d agent: (P.	O. Box NOT ac	ceptable)	į		AM 10: 06	
Name:	CT Corporation System	· · · · · · · · · · · · · · · · · · ·	<del></del> -				•	
Office Address:	1200 South Pine Island Road	<u> </u>	•					
	Plantation		, Florida	33324				
	(City)			(Zip code)				
10. Registered s	gent's acceptance:							
	ted as registered agent and to							
further agree to	application, I hareby accept comply with the provisions of r with and accept the obligati	all statutes	relative to the p	roper and complete pe				
	, -		_					
	Λ	C T Corpora	tion system					
<u>1</u>	ly: Conne T	<u>- zus</u>	·					
	(Registered age	nt's signatur	<b>e</b> )					

11. Attached is a certificate of existence duly authenticated, not more than 90 days prior to delivery of this application to the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction under the law of which it is incorporated.

12. Names and business addresses of officers and/or directors:			•
A. DIRECTORS			
Chairman: See Attachment A			•
Address:			
Vice Chairman:			
Address:	<u> </u>		
Director:			
Address:			
			,
Director:			
Address;			•
	<del></del>		
B. OWFICERS	Z,	2 05	
President: See Attachment A	<u> </u>	8 6	
Address:		05 NOV 29	7
	THE THE	2>-	LICED
Vice President:	ORIGINAL STATE	70	9
Address:		AM 10: 06	٠
		U)	
Secretary:			
Address:			
Treasurer:			
Address:			
•			
NOTE: If necessary, you may attach an addplitum to the application listing additional officers and/or directors.			
13. Church ton			
(Signature of Director or Officer listed in number 12 of the application)			
14. Christopher T. Ford, President  (Typed or printed name and caracity of person signing application)			

#### Attachment A

## ARA Subsidiary Corp. Officers and Directors

Name

Title

Christopher T. Ford 5 Cherry Hill Drive Danvers, MA 01923

President and Director

Joseph A. Carlucci 5 Cherry Hill Drive Danvers, MA 01923

Secretary and Director

John McDonough 5 Cherry Hill Drive Danvers, MA 01923

Treasurer

Howard Bilow 5 Cherry Hill Drive Danvers, MA 01923 Executive V.P. Corporate Development

Syed T. Kamal 5 Cherry Hill Drive Danvers, MA 01923 Executive V.P. Operations and Director

D. Neal Morrison 301 South College Street 12th Floor Charlotte, NC 28288-0732

Director

Scott B. Perper 301 South College Street 12th Floor

Director

301 South College Street 12th Floor Charlotte, NC 28288-0732

Donald A. Leeber, M.D.

5 Cherry Hill Drive Danvers, MA 01923 Director

NOV 29 AM

NOVEMBER, A.D. 2005.

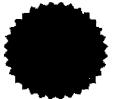
# Delaware

The First State

PAGE 1

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "ARA SUBSIDIARY CORP." IS DULY INCORPORATED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL CORPORATE EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS OF THE TWENTY-NINTH DAY OF

AND I DO HERBY FURTHER CERTIFY THAT THE FRANCHISE TAXES HAVE NOT BEEN ASSESSED TO DATE.



Warriet Smith Hindson Harriet Smith Windson

4055521 8300

050965686

AUTHENTICATION: 4326043

DATE: 11-29-05